

Pullman Fire Department

55 NW Terre View Dr., Pullman, WA 99163

Bureau of Fire Prevention

1(509)338-3274

Construction Permit Application

Site Address: _____ **Suite/Unit #:** _____
Tenant/Building Name: _____
Site Contact Name: _____ **Phone #:** _____
Name of Contractor/Business: _____ **Contractor Lic. #:** _____
Address: _____ **Phone #:** _____
City: _____ **State:** _____ **Zip:** _____
Contact Name: _____ **Cell#:** _____ **Phone #:** _____
Contact Email: _____

Description of Work: _____

Valuation of Work (Total cost estimate of system includes installation, parts and labor costs) \$ _____

Submitted plans shall include: Minimum 2 sets of System plans (24"X36")
Minimum 2 sets of complete equipment cut-sheets
If applicable - Minimum 2 sets of hydraulic calculations

I HEREBY CERTIFY THAT I HAVE READ AND UNDERSTAND THIS PERMIT. ALL LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH, WHETHER SPECIFIED HEREIN OR NOT. GRANTING THIS PERMIT DOES NOT GIVE AUTHORITY FOR ANY VIOLATION OF FEDERAL, STATE OR LOCAL LAWS, CODES OR ORDINANCES. I AGREE TO COMPLY WITH ALL REQUIREMENTS OF THIS PERMIT.

Signature of Owner / Authorized Agent: _____ **Date:** _____

Printed Name _____

****OFFICIAL USE ONLY******Construction Permit & Plan Review Fee Calculations**

System Type	Est. cost	Permit fee	plan review fee
Fire extinguishing systems			
Standpipe systems			
Fire pumps & related equipment			
Alarm/detection sys. & related equip			
Commercial kitchen hood system			
Totals	\$	\$	\$

Misc. Plan Reviews Costs

Project Name	Hours for review	(\$85 per hr. - one hour min.)
Misc. Plan Review Fee Totals	\$	

Total of all applicable fees: \$ _____ **Receipt #:** _____

Received on: _____ **Received by:** _____ **Approval by:** _____ **Date:** _____